

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>M.E.S. 21</i>		<i>08-16-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>H-5</i>	<i>866</i>	<i>09-18-01</i>
RESPONSE FORMALITY REVIEW	<i>21</i>	<i>825</i>	<i>11/05/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	<i>✓</i>
2	<i>✓</i>
3	<i>✓</i>
4	<i>✓</i>
5	<i>✓</i>
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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*53*  
*10/16*  
*20/10/01*